

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

09588998

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
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TOTAL
IND.

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TOTAL
DEP.

24
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TOTAL
CLAIMS

29
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PTO-1380 (3-76)

TOTAL
IND.

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TOTAL
DEP.

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TOTAL
CLAIMS

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